

**Continuity of Operations Planning** 

**Steadfast Response II COOP Tabletop Exercise** 

**Facilitator Guide** 

FY 2006

Minnesota Federal Executive Board







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#### 1. GENERAL

This guide has been prepared to assist facilitators, scribes, and subject matter experts in the conduct of the Steadfast Response COOP tabletop exercise. It is not a "stand alone" document. It is meant to be used along with the exercise plan and to be further explained by someone who has participated in the conduct of the exercise originally done February 5, 2004 in Chicago.

Starting with a "National Security Seminar" in November 2002, FEMA Region V, the GSA Great Lakes Region, and the Chicago Federal Executive Board worked together to raise the level of Continuity of Operations Planning [COOP] awareness in the Chicago area. Done in anticipation of a National scale WMD terrorism exercise, titled TOPOFF II, with a Chicago venue, the team worked to enhance COOP readiness in the region by delivering a series of eight COOP seminars on different COOP related topics to the Federal community in the Chicago Metro area. The content from the eight seminars was then repackaged into a 3½ hour presentation and delivered to Federal participants in seven other major cities throughout the region. That series of seminars has been followed by further, more in depth seminars at each location. To date, more than 1800 people have attended the presentations, workshops, and exercises.

The next step towards enhanced readiness is Steadfast Response 2004. This locally developed COOP exercise is designed to provide a forum for participating departments and agencies to validate their COOP plans, policies, and procedures. The half-day event will consist of an introductory session, followed by a two hour, facilitated exercise period. Participants will be able to interact in small groups, with others whose departments and agencies are of similar size and level of readiness. The Steadfast Response exercise scenario is designed to provoke discussion of important topics. There will be a plenary session at the end of the exercise to discuss issues raised during exercise play, share best practices, and to discuss follow on activities. The exercise will be beneficial for participants regardless of their department or agency's level of readiness.

The exercise is designed to achieve the following primary objectives:

- Provide a forum for participating agencies to validate COOP plans, policies, and procedures in a no fault, non-attribution environment.
- Provide a scenario that will allow participating agencies, at their option, to concurrently
  exercise and evaluate their alert procedures, capability to deploy, functionality of
  interoperable communications, and alternate facilities.
- Provide a forum for participants to share best practices and lessons learned.

Departments and agencies will be invited to participate in the exercise through their respective Federal Executive Board or Association. In order to enhance learning and interaction, a maximum of three participants from each department or agency will be allowed to attend. Participants will be categorized into one of three primary readiness categories. Group A will consist of agencies that do not have a formal COOP plan. Group B consists of agencies that have a COOP plan, but either do not have an alternate site; a formal Test, Training, and Exercise Program; or have not conducted training in accordance with FPC 65. Group C is the most advanced of the groups, and based on their sign-up survey, indicated that they have formal COOP and COOP TT&E plans, and has exercised those plans recently. All the breakout groups will be segmented as falling into categories A, B, or C. Groups may be further broken down based on whether they have an alternate site and other considerations such agency size depending on resource constraints.

# 2. Facilitator "PD"

After an initial one-hour session for welcoming remarks and play instructions, participants will go to one of the separate rooms with their respective group. Each room will have a scribe, and a facilitator. Exercise injects will be delivered by PowerPoint to assure consistency and that the group stays on time. One participant will be selected from each group to report and answer questions for 4 minutes during the plenary session. **There will be a non-attribution policy in effect at all times during the exercise.** 

It is at this point that the team of Facilitator and Scribe will determine the success of the exercise.

#### Here is a brief "PD" for the facilitator:

The key role of the Facilitator is to keep the discussion going, on track, and on time. It is not necessary that the Facilitators be "subject matter experts" per se, but they should have some familiarity with FPC 65. The people we're looking for should be volunteers who are genuinely interested in doing a great job, preferably having facilitated group discussions in the past. The desire to do well is more important to me than previous experience. In fact, sometimes the subject matter experts can actually inhibit the discussion. We want the players to solve the problems. Facilitators need to be outgoing and happy and if they have an opinion, we shouldn't be able to tell.

What has been done, and it has worked well, is that a bunch of interested people show up at the initial meetings. There is talking, interaction, and it becomes apparent who should be in what role and who isn't willing to make the real effort. In between the meeting and the exercise a member of the FEMA / GSA Partnership will be talking to these people and offering some guidance and help.

Here is what those in the facilitator position would be focused on:

This is an exercise designed to provide a forum for participants to self evaluate their COOP readiness. There will be no traditional "evaluation" conducted. Your mission as a Facilitator is to ensure that key topics as listed in the exercises materials that will be provided and on the exercise PowerPoint slides are discussed and that the discussion takes place in the time allotted. Additionally, the facilitation team should:

- Deliver the messages you have been assigned at the time indicated.
- No unplanned simulations should be allowed.
- Due to time constraints, facilitators may be required to prompt a player as to what a specific response should be and clarify information as required to move the play along.
- Facilitators will continue the exercise until an Exercise Director has directed termination or Message #5 arrives.
- Near the end exercise termination, ask a breakout participant to prepare to report issues and best practices during the final plenary session. The scribe can assist in preparing notes, but a player must be the actual presenter.

#### 3. Facilitation Skills

From the Community Toolbox Contributed by Marya Axner Edited by Bill Berkowitz

What are facilitation skills?
Why do you need facilitation skills?
How do you facilitate?
How do you plan a good facilitation process?

Facilitating a meeting or planning session: What's it all about?

Facilitator skills and tips

Dealing with disrupters: Preventions and interventions

#### What are facilitation skills?

Exercises are geared towards action. There are urgent problems and issues we need to tackle and solve in our communities. That's why we came together in the first place, isn't it? But for groups to be really successful, we need to spend some time focusing on the skills our members and leaders use to make all of this action happen, both within and outside our organizations.

One of the most important sets of skills for leaders and members are facilitation skills. These are the "process" skills we use to guide and direct key parts of our organizing work with groups of people such as meetings, planning sessions, and training of our members and leaders.

Whether it's a meeting (big or small) or a training session, someone has to shape and guide the process of working together so that you meet your goals and accomplish what you've set out to do. While a group of people might set the agenda and figure out the goals, one person needs to concentrate on how you are going to move through your agenda and meet those goals effectively. This is the person we call the "facilitator."

So, how is facilitating different than chairing a meeting?

Well, it is and it isn't. Facilitation has three basic principles:

A facilitator is a guide to help people move through a process together, not the seat of wisdom and knowledge. That means a facilitator isn't there to give opinions, but to draw out opinions and ideas of the group members.

Facilitation focuses on HOW people participate in the process of learning or planning, not just on WHAT gets achieved.

A facilitator is neutral and never takes sides.

The best meeting chairs see themselves as facilitators. While they have to get through an agenda and make sure that important issues are discussed, decisions made, and actions taken, good chairs don't feel that they have all of the answers or should talk all the time. The most important thing is what the participants in the meeting have to say. So, focus on how the meeting is structured and run to make sure that everyone can participate. This includes things like:

Making sure everyone feels comfortable participating

Developing a structure that allows for everyone's ideas to be heard

Making members feel good about their contribution to the meeting

Making sure the group feels that the ideas and decisions are theirs, not just the leaders. Supporting everyone's ideas and not criticizing anyone for what they've said.

## Why do you need facilitation skills?

If you want to do good planning, keep members involved, and create real leadership opportunities in your organization and skills in your members, you need facilitator skills. The more you know about how to shape and run a good learning and planning process, the more your members will feel empowered about

their own ideas and participation, stay invested in your organization, take on responsibility and ownership, and the better your meetings will be.

# How do you facilitate?

Meetings are a big part of our organizing life. We seem to always be going from one meeting to the next. The next session in the Tool Box covers planning and having good meetings in depth. But here, we're going to work on the process skills that good meeting leaders need to have. Remember, these facilitation skills are useful beyond meetings: for planning; for "growing" new leaders; for resolving conflicts; and for keeping good communication in your organization.

Can anyone learn to facilitate a meeting?

Yes, to a degree. Being a good facilitator is both a skill and an art. It is a skill in that people can learn certain techniques and can improve their ability with practice. It is an art in that some people just have more of a knack for it than others. Sometimes organization leaders are required to facilitate meetings: thus, board presidents must be trained in how to facilitate. But other meetings and planning sessions don't require that any one person act as facilitators, so your organization can draw on members who have the skill and the talent.

To put it another way, facilitating actually means:

Understanding the goals of the meeting and the organization

Keeping the group on the agenda and moving forward

Involving everyone in the meeting, including drawing out the quiet participants and controlling the domineering ones

Making sure that decisions are made democratically

#### How do you plan a good facilitation process?

A good facilitator is concerned with both the outcome of the meeting or planning session, with how the people in the meeting participate and interact, and also with the process. While achieving the goals and outcomes that everyone wants are of course important, a facilitator also wants to make sure that the process if sound, that everyone is engaged, and that the experience is the best it can be for the participants.

In planning a good meeting process, a facilitator focuses on:

Climate and Environment

Logistics and Room Arrangements

**Ground Rules** 

A good facilitator will make plans in each of these areas in advance. Let's look at some of the specifics:

# Ground Rules

Most meetings have some kind of operating rules. Some groups use Robert's Rules of Order (parliamentary procedure) to run their meetings while others have rules they've adopted over time. When you want the participation to flow and for folks to really feel invested in following the rules, the best way to go is to have the group develop them as one of the first steps in the process. This builds a sense of power in the participants ("Hey, she isn't telling us how to act. It's up to us to figure out what we think is important!") and a much greater sense of investment in following the rules. Common ground rules are:

One person speaks at a time

Raise your hand if you have something to say

Listen to what other people are saying

No mocking or attacking other people's ideas

Be on time coming back from breaks (if it's a long meeting)

Respect each other.

A process to develop ground rules is:

Begin by telling folks that you want to set up some ground rules that everyone will follow as we go through our meeting. Put a blank sheet of newsprint on the wall with the heading "Ground Rules."

Ask for any suggestions from the group. If no one says anything, start by putting one up yourself. That usually starts people off.

Write any suggestions up on the newsprint. It's usually most effective to "check -in" with the whole group before you write up an idea ("Sue suggested raising our hands if we have something to say. Is that O.K. with everyone?") Once you have gotten 5 or 6 good rules up, check to see if anyone else has other suggestions.

When you are finished, ask the group if they agree with these Ground Rules and are willing to follow them. Make sure you get folks to actually say "Yes" out loud. It makes a difference!

# Facilitating a meeting or planning session: What's it all about?

So much for background. Now, let's cover the three basic parts of facilitation:

The process of the meeting

Skills and tips for guiding the process

Dealing with disrupters: preventions and interventions

## The meeting process

As we've already said, the facilitator is responsible for providing a "safe" climate and working atmosphere for the meeting. But you're probably wondering, "What do I actually do DURING the meeting to guide the process along?" Here are the basic steps that can be your facilitator's guide:

# 1. Start the meeting on time

Few of us start our meetings on time. The result? Those who come on time feel cheated that they rushed to get there! Start no more than five minutes late, ten at the maximum and thank everyone who came on time. When latecomers straggle in, don't stop your process to acknowledge them. Wait until after a break or another appropriate time to have them introduce themselves.

# 2. Welcome everyone

Make a point to welcome everyone who comes. Don't complain about the size of a group if the turnout is small! Nothing will turn the folks off who DID come out faster. Thank all of those who are there for coming and analyze the turnout attendance later. Go with who you have.

## 3. Make introductions

There are lots of ways for people to introduce themselves to each other that are better than just going around the room. The kinds of introductions you do should depend on what kind of meeting you are having, the number of people, the overall goals of the meeting, and what kind of information it would be useful to know. Some key questions you can ask members to include in their introductions are:

How did you first get involved with our organization? (if most people are already involved, but the participants don't know each other well)

What do you want to know about our organization? (if the meeting is set to introduce your organization to another organization)

What makes you most angry about this problem? (if the meeting is called to focus on a particular problem)

Sometimes, we combine introductions with something called an "ice breaker." Ice breakers can:

Break down feelings of unfamiliarity and shyness

Help people shift roles--from their "work" selves to their "more human" selves

Build a sense of being part of a team

Create networking opportunities

Help share participants' skills and experiences

Some ways to do introductions and icebreakers are:

In pairs, have people turn to the person next to them and share their name, organization and three other facts about themselves that others might not know. Then, have each pair introduce EACH OTHER to the group. This helps to get strangers acquainted and for people to feel safethey already know at least one other person, and didn't have to share information directly in front of a big group at the beginning of the meeting.

Form small groups and have each of them work on a puzzle. Have them introduce themselves to their group before they get to work. This helps to build a sense of team work.

In a large group, have everyone write down two true statements about themselves and one false one. Then, every person reads their statements and the whole group has to guess which one is false. This helps folks get acquainted and relaxed.

Give each participant a survey and have the participants interview each other to find the answers. Make the questions about skills, experience, opinions on the issue you'll be working on, etc. When everyone is finished, have folks share the answers they got.

When doing introductions and icebreakers, it's important to remember:

Every participant needs to take part in the activity. The only exception may be latecomers who arrive after the introductions are completed. At the first possible moment, ask the latecomers to say their name and any other information you feel they need to share in order for everyone to feel comfortable and equal.

Be sensitive to the culture, age, gender and literacy levels of participants and any other factors when deciding how to do introductions. For example, an activity that requires physical contact or reading a lengthy instruction sheet may be inappropriate for your group. Also, keep in mind what you want to accomplish with the activity. Don't make a decision to do something only because it seems like fun.

It is important to make everyone feel welcome and listened to at the beginning of the meeting. Otherwise, participants may feel uncomfortable and unappreciated and won't participate well later on. Also, if you don't get some basic information about who is there, you may miss some golden opportunities. For example, the editor of the regional newspaper may be in the room; but if you don't know, you'll miss the opportunity for a potential interview or special coverage.

And don't forget to introduce yourself. You want to make sure that you establish some credibility to be facilitating the meeting and that folks know a bit about you. Credibility doesn't mean you have a college degree or 15 years of facilitation experience. It just means that you share some of your background so folks know why you are doing the facilitation and what has led you to be speaking up.

4. Review the agenda, objectives and ground rules for the meeting

Go over what's going to happen in the meeting. Check with the group to make sure they agree with and like the agenda. You never know if someone will want to comment and suggest something a little different.

This builds a sense of ownership of the meeting and lets people know early on that you're there to facilitate THEIR process and THEIR meeting, not your own agenda.

The same is true for the outcomes of the meeting. You'll want to go over these with folks as well to get their input and check that these are the desired outcomes they're looking for. This is also where the ground rules that we covered earlier come in.

# 5. Encourage participation

This is one of your main jobs as a facilitator. It's up to you to get those who need to listen to listen and those who ought to speak. Encourage people to share their experiences and ideas and urge those with relevant background information share it at appropriate times.

### 6. Stick to the agenda

Groups have a tendency to wander far from the original agenda, sometimes without knowing it. When you hear the discussion wandering off, bring it to the group's attention. You can say "That's an interesting issue, but perhaps we should get back to the original discussion."

## 7. Avoid detailed decision-making

Sometimes, it's easier for groups to discuss the color of napkins than the real issues they are facing. Help the group not to get immersed in details. Suggest instead, "Perhaps the committee could resolve the matter." Do you really want to be involved in that level of detail?

#### 8. Seek commitments

Getting commitments for future involvement is often a meeting goal. You want leaders to commit to certain tasks, people to volunteer to help on a campaign, or organizations to support your group. Make sure adequate time is allocated for seeking commitment. For small meetings, write people's names down on newsprint next to the tasks they agreed to undertake.

One important rule of thumb is that no one should leave a meeting without something to do. Don't ever close a meeting by saying "We'll get back to you to confirm how you might like to get involved." Seize the moment! Sign them up!

## 9. Bring closure to each item

Many groups will discuss things ten times longer than they need to unless a facilitator helps them to recognize they're basically in agreement. Summarize a consensus position, or ask someone in the group to summarize the points of agreement, and then move forward. If one or two people disagree, state the situation as clearly as you can: "Tom and Levonia seem to have other feelings on this matter, but everyone else seems to go in this direction. Perhaps we can decide to go in the direction that most of the group wants, and maybe Tom and Levonia can get back to us on other ways to accommodate their concerns." You may even suggest taking a break so Tom and Levonia can caucus to come up with some options.

Some groups feel strongly about reaching consensus on issues before moving ahead. If your group is one of them, be sure to read a good manual or book on consensus decision making. Many groups, however, find that voting is a fine way to make decisions. A good rule of thumb is that a vote must pass by a two-thirds majority for it to be a valid decision. For most groups to work well, they should seek consensus where possible, but take votes when needed in order to move the process forward.

#### 10. Respect everyone's rights

The facilitator protects the shy and quiet folks in a meeting and encourages them to speak out. There is also the important job of keeping domineering people from monopolizing the meeting or ridiculing the ideas of others.

Sometimes, people dominate a discussion because they are really passionate about an issue and have lots of things to say. One way to channel their interest is to suggest that they consider serving on a committee or task force on that issue. Other people, however, talk to hear themselves talk. If someone like that shows up at your meeting, look further ahead in this chapter for some tips on dealing with "disrupters."

#### 11. Be flexible

Sometimes issues will arise in the meeting that is so important, it will take much more time than you thought. Sometimes, nobody will have thought of them at all. You may run over time or have to alter your agenda to discuss them. Be sure to check with group about whether this is O.K. before going ahead with the revised agenda. If necessary, ask for a five-minute break to confer with key leaders or participants on how to handle the issue and how to restructure the agenda. Be prepared to recommend an alternate agenda, dropping some items if necessary.

#### 12. Summarize the meeting results and needed follow-ups

Before ending the meeting, summarize the key decisions that were made and what else happened. Be sure also to summarize the follow-up actions that were agreed to and need to take place. Remind folks how much good work was done and how effective the meeting hopefully was. Refer back to the objectives or outcomes to show how much you accomplished.

#### 13. Thank the participants

Take a minute to thank people who prepared things for the meeting, set up the room, brought refreshments, or did any work towards making the meeting happen. Thank all of the participants for their input and energy and for making the meeting a success.

### 14. Close the meeting

People appreciate nothing more than a meeting that ends on time! It's usually a good idea to have some "closure" in a meeting, especially if it was long, if there were any sticky situations that caused tension, or if folks worked especially hard to come to decisions or make plans.

A nice way to close a meeting is to go around the room and have people say one word that describes how they are feeling now that all of this work has been done. You'll usually get answers from "exhausted" to "energized!" If it's been a good meeting, even the "exhausted" ones will stick around before leaving.

## Facilitator skills and tips

Here are a few more points to remember that will help to maximize your role as a facilitator:

#### 1. Don't memorize a script

Even with a well-prepared agenda and key points you must make, you need to be flexible and natural. If people sense that you are reading memorized lines, they will feel like they are being talked down to, and won't respond freely.

## 2. Watch the group's body language

Are people shifting in their seats? Are they bored? Tired? Looking confused? If folks seem restless or in a haze, you may need to take a break or speed up or slow down the pace of the meeting. And if you see confused looks on too many faces, you may need to stop and check in with the group, to make sure that everyone knows where you are in the agenda and that the group is with you.

#### 3. Always check back with the group

Be careful about deciding where the meeting should go. Check back after each major part of the process to see if there are questions and that everyone understands and agrees with decisions that were made.

# 4. Summarize and pause

When you finish a point or a part of the meeting process, sum up what was done and decided, and pause for questions and comments before moving on. Learn to "feel out" how long to pause -- too short, and people don't really have time to ask questions; too long, and folks will start to get uncomfortable from the silence.

## 5. Be aware of your own behavior

Take a break to calm down if you feel nervous or are losing control. Watch that you're not repeating yourself, saying "ah" between each word, or speaking too fast. Watch your voice and physical manner. (Are you standing too close to folks so they feel intimidated, making eye contact so people feel engaged?) How you act makes an impact on how participants feel.

#### 6. Occupy your hands

Hold onto a marker, chalk, or the back of a chair. Don't play with the change in your pocket!

#### 7. Watch your speech

Be careful you are not offending or alienating anyone in the group (i.e. use of swear words)

#### 8. Use body language of our own

Using body language to control the dynamics in the room can be a great tool. Moving up close to a shy, quiet participant and asking them to speak may make them feel more willing, because they can look at you instead of the big group and feel less intimidated. Also, walking around engages people in the process. Don't just stand in front of the room for the entire meeting.

#### 9. Don't talk to the newsprint, blackboard or walls--they can't talk back!

Always wait until you have stopped writing and are facing the group to talk.

#### Dealing with disrupters: Preventions and interventions

Along with these tips on facilitation, there are some things you can do both to prevent disruption before it occurs to stop it when it's happening in the meeting. The most common kinds of disrupters are people who try to dominate, keep going off the agenda, have side conversations with the person sitting next to them, or folks who think they are right and ridicule and attack other's ideas.

Try using these "Preventions" when you set up your meeting to try to rule out disruption:

### 1. Get agreement on the agenda, ground rules and outcomes

In other wards, agree on the process. These process agreements create a sense of shared accountability and ownership of the meeting, joint responsibility for how the meeting is run, and group investment in whether the outcomes and goals are achieved.

#### 2. Listen carefully

Don't just pretend to listen to what someone in the meeting is saying. People can tell. Listen closely to understand a point someone is making. Check back if you are summarizing; always ask the person if you understood their idea correctly.

#### 3. Show respect for experience

We can't say it enough. Encourage folks to share strategies, stories from the field, and lessons they've learned. Value the experience and wisdom in the room.

# 4. Find out the group's expectations

Make sure that you uncover in the beginning what the participants think they are meeting for. When you find out their meeting purpose, be clear about what will and won't be covered in this meeting. Make plans for how to cover issues that won't be dealt with: Write them down on newsprint and agree to deal with them at the end of the meeting, or have the group agree on a follow-up meeting to cover unfinished issues.

There are lots of ways to find out what the group's expectations of the meeting are: Try asking everyone to finish this sentence: "I want to leave here today knowing...." You don't want people sitting through the meeting feeling angry that they're in the wrong place and no one bothered to ask them what they wanted to achieve here. These folks may act out their frustration during the meeting and become your biggest disrupters.

### 5. Stay in your facilitator role

You cannot be an effective facilitator and a participant at the same time. When you cross the line, you risk alienating participants, causing resentment, and losing control of the meeting. Offer strategies, resources, and ideas for the group to work with, but NOT opinions.

#### 6. Don't be defensive

If you are attacked or criticized, take a "mental step" backwards before responding. Once you become defensive, you risk losing the group's respect and trust, and might cause folks to feel they can't be honest with you.

#### 7. "Buy-in" power players

These folks can turn your meeting into a nightmare if they don't feel that their influence and role are acknowledged and respected. If possible, give them acknowledgment up front at the start of the meeting. Try giving them roles to play during the meeting such as a "sounding board" for you at breaks, to check in with about how the meeting is going.

Try using these "Interventions" when disruption is happening during the meeting:

#### 1. Have the group decide

If someone is dominating the meeting, refuses to stick to the agenda, keeps bringing up the same point again and again, or challenges how you are handling the meeting:

First try to remind them about the agreed-on agenda. If that doesn't work, throw it back to the group and ask them how they feel about that person's participation. Let the group support you.

#### 2. Use the agenda and ground rules

If someone keeps going off the agenda, has side conversations through the whole meeting, verbally attacks others:

Go back to that agenda and those ground rules and remind folks of the agreements made at the beginning of the meeting.

#### 3. Be honest: Say what's going on

If someone is trying to intimidate you, if you feel upset or undermined, if you need to pull the group behind you:

It's better to say what's going on than try to cover it up. Everyone will be aware of the dynamic in the room. The group will get behind you if you are honest and up -front about the situation.

#### 4. Use humor

If there is a lot of tension in the room, if you have people at the meeting who didn't want to be there, if folks are scared/shy about participating, if you are an outsider:

Try a humorous comment or a joke. Humor almost always lightens the mood. It's one of the best tension-relievers we have. Be sure, however, not to invoke humor at the expense of anyone else.

## 5. Accept or legitimize the point or deal:

If there is someone who keeps expressing doubts about the group's ability to accomplish anything, is bitter and puts down others' suggestions, keeps bringing up the same point over and over, seems to have power issues:

Try one or more of these approaches: Show that you understand their issue by making it clear that you hear how important it is to them. Legitimize the issue by saying, "It's a very important point and one I'm sure we all feel is critical." Make a bargain to deal with their issue for a short period of time ("O.K., let's deal with your issue for 5 minutes and then we ought to move on.") If that doesn't work, agree to defer the issue to the end of the meeting, or set up a committee to explore it further.

### 6. Use body language

If side conversations keep occurring, if quiet people need to participate, if attention needs to be refocused:

Use body language. Move closer to conversers, or to the quiet ones. Make eye contact with them to get their attention and covey your intent.

#### 7. Take a break

If less confrontational tactics haven't worked, someone keeps verbally attacking others, shuffling papers, cutting others off:

In case you've tried all of the above suggestions and nothing has worked, it's time to take a break, invite the disruptive person outside the room and politely but firmly state your feelings about how disruptive their behavior is to the group. Make it clear that the disruption needs to end. But also try to find out what's going on, and see if there are other ways to address that person's concerns.

## 8. Confront in the room

If all else has failed, if you're sure it won't create backlash, if the group will support you, and if you've tried everything else:

Confront the disruptive person politely but very firmly in the room. Tell the person very explicitly that the disruption needs to stop now. Use body language to encourage other group members to support you. This is absolutely the last resort when action must be taken and no alternatives remain!

## 4. Exercise Concept

Departments and agencies will be invited to participate in the exercise through their respective Federal Executive Board or Association. In order to enhance learning and interaction, a maximum of three participants from each department or agency will be allowed to attend. Participants will be categorized into one of three primary readiness categories. Group A will consist of agencies that do not have a formal COOP plan. Group B consists of agencies that have a COOP plan, but either do not have an alternate site; a formal Test, Training, and Exercise Program; or have not conducted training in accordance with FPC 65. Group C is the most advanced of the groups, and based on their sign-up survey, indicated that they have formal COOP and COOP TT&E plans, and has exercised those plans recently. All the breakout groups will be segmented as falling into categories A, B, or C. Groups may be further broken down based on whether they have an alternate site and other considerations such agency size depending on resource constraints.

After an initial one-hour session for welcoming remarks and play instructions, participants will go to one of the separate rooms with their respective group. Each room will have a scribe, and a facilitator. Exercise injects will be delivered by PowerPoint with embedded video of simulated news [the Virtual News Network] to assure consistency and that the group stays on time. One participant will be selected from each group to report and answer questions for 4 minutes during the plenary session. There will be a non-attribution policy in effect at all times during the exercise.

# 5. Safety and Security

#### **GENERAL SAFETY ISSUES**

Steadfast Response is a tabletop exercise with an optional functional deployment component. The tabletop component is being conducted in a conference center environment on the GSA Conference Room G110 of the Bishop Henry Whipple Federal Building.

During the initial hour of the event, the conference center manager or a member of the exercise control team will give instructions on safe evacuation of the building and other related safety issues in accordance with the conference center's Occupant Emergency Plan.

Agencies are encouraged to deploy staff to alternate facilities concurrent with the tabletop portion of the exercise. Those agencies are solely responsible for the safety of their employees and are encouraged to conduct an appropriate safety brief.

The Controllers will function as Safety Officers for the exercise. All exercise participants are to report any unsafe conditions or concerns directly to the Controllers.

The general safety measures to be followed by all participants include:

- Safety for all participants, as well as equipment and material, is first priority.
- Response to any actual occurrence that poses a safety or medical emergency during the exercise will take precedence over exercise activities.

## **EMERGENCY CALL OFF OF THE EXERCISE**

Emergency real-world actions take priority over exercise activities. The "real-world" emergency code words are TERMINATE ALL PLAY IMMEDIATELY. The Controllers will only use this in the event of an actual emergency. Upon issuance of this codeword, all exercise play will cease immediately.

# 6. Facilitator Tear Sheets

Time	Inject	Event/Activity
0730		Exercise Directors, Facilitators, Subject Matter Experts, and Scribes meet in primary conference room.
0730		Registration begins.
0800		Exercise begins with welcome and administrative details, ground rules, and COOP overview.
0900		Breakout sessions begin.
0910	1	Inject: Aggressive strain of influenza strikes, spreads quickly.
0930		Exercise Directors tour breakout rooms to verify consistency.
0930	2	Inject: Flu conditions get worse-directly affecting operations.
0950		Exercise Directors tour breakout rooms to verify consistency.
1000	3	Inject: Flu conditions continue to get worse-employees die, stress accumulates, operations slow further.
1020		Exercise Directors tour breakout rooms to verify consistency.
1030	4	Inject: Flu wanes temporarily, but re-emerges.
1040		Exercise Directors tour breakout rooms to verify consistency.
1050	5	Inject: Return to normal operations. Breakout sessions terminated.
1100		Final plenary session begins, with reports from each breakout session, followed by summary by appropriate senior leaders.
1145		EXERCISE CONCLUDES

BREAKOUT ROOM		FACILITATOR:
AGENCY SIZE		SCRIBE:
READINESS LEVEL	Group A / No Plan	COOP SME:

MESSAGE INJECT <b>01</b>	POINTS OF DISCUSSION
WESSAGE INJECT <b>01</b>	FOINTS OF DISCUSSION

In the New York, Chicago, and Los Angeles areas there is a rush of people flooding into emergency rooms and urgent care centers. At this point, there are no specifics available, except that this mysterious illness appears to be an aggressive strain of influenza. This outbreak of unusually severe influenza/respiratory illness has occurred affecting individuals in all age groups in the New York, Chicago, and Los Angeles areas. Within the last 24 hours, at least 150, 000 cases were reported in these areas. The 24-hour news channels report that of the 150,000 cases reported, 10,000 patients have been hospitalized. Of these, 2,500 individuals have already died. Many of these victims appear to have severe breathing problems requiring the use of ventilators. It is assumed that some of these individuals contracted the flu when they visited areas located in Asia and Turkey. A spokesman for the U.S. Centers for Disease Control and Prevention (CDC) has no specifics, except that this strain of the flu appears to be very aggressive.

The Minnesota State Department of health has reported no cases of similar flu-like symptoms in other individuals. As it stands, emergency rooms are quiet as there hasn't been a flood of individuals complaining of flu-like symptoms or suffering from respiratory distress.

Stay tuned for continuing coverage of events locally and around the country...

## THIS IS AN EXERCISE

# **INFORMATION TO BE PROVIDED BY FACILITATOR**

The CDC investigates the circumstances involving how people contracted this illness, and along with laboratory results, determines that the strain of flu is, in fact, the H5N1, Avian influenza virus. Knowing that this virus spreads through human to human transmission, critical workers, such as health care workers, are the first to be vaccinated with a small supply of experimental vaccine against this threat; however, it is unknown if these individuals will gain immunity to this strain of flu from this vaccine. Several cases of the avian influenza are suspected among ill people in Minneapolis and St. Paul hospitals.

# THIS IS AN EXERCISE

## **Inject Focus**

The focus of this period will be identifying the emergency communications, interagency communications, alerts / rosters, and initial planning.

From FPCs: Ensure that agency personnel are familiar with recognizing the potential threat of a pandemic flu outbreak, which will result in not only informing personnel of this threat but also keeping them abreast of the situation as it develops, and also vaccinating key individuals. This process will require identifying key personnel by using alert, notification, and deployment procedures.

- ✓ Have you considered outlining a decision process for determining when to COOP? Who is responsible for making that decision? How can you recognize the circumstances that might trigger activation?
- Do you have procedures and/or technology that outline how staff will be contacted both during duty hours and after hours?
- ✓ What sort of COOP training have you had so far for your employees?
- How do you ensure contact information is up to date?
- Do you have at least two methods of contacting staff and key personnel?
- ✓ Are there individuals that serve as backup personnel for your organization? If an individual is incapacitated, is there another individual familiar with procedures so he/she can take the place of the incapacitated individual? Do you have any written guidelines to assist backup personnel in performing necessary functions?

BREAKOUT ROOM		FACILITATOR:
AGENCY SIZE		SCRIBE:
READINESS LEVEL	Group A / No Plan	COOP SME:

- 1		
	MESSAGE INJECT <b>02</b>	POINTS OF DISCUSSION
	I MESSAGE INJECT <b>UZ</b>	I BOINTO OF DIOCHOOLON

Seven days have now passed since the initial outbreak and local hospitals and outpatient clinics in the Twin Cities area have seen more than 4,500 cases of potential Avian influenza. People begin to flood emergency rooms and outpatient clinics seeking antiviral medications. Stores begin to flood with people that seek to purchase over-the-counter remedies and medications for the flu. Other individuals flood grocery stores to stock up on food and supplies. As more and more people flood stores, they aggressively spread the virus through germs via touch or airborne particles.

Since persons can be infected and contagious 1-2 days before showing symptoms, there is no way to determine the actual numbers of those infected with the virus at this time.

Stay tuned for continuing coverage of events locally and around the country...

### THIS IS AN EXERCISE

## **INFORMATION TO BE PROVIDED BY FACILITATOR**

So much for the good news...

CDC personnel, in the course of evaluating the virus strain circulating in Minnesota, have identified and confirmed it as the H5N1 strain of influenza. A small number of your key personnel have been vaccinated but there is no way of knowing if the vaccination will provide immunity to these individuals. Statewide cases are reported in Duluth, Rochester, St. Cloud, Brainerd, and Bemidji. The experimental vaccine has run out and antiviral medications are in short supply.

#### THIS IS AN EXERCISE

#### **Inject Focus**

The focus of this period will be a discussion of the initial procedures for activating the COOP plan and responding to the threat of a possible pandemic flu outbreak.

From FPCs: Exercise procedures by selecting and deploying alternative key personnel to run essential functions, as well as everyday operations, in key positions within the organization.

Ensure that there are enough trained and available personnel that are required to support essential functions. Ensure that if there are not enough personnel that your organization has written guidelines on how to accomplish essential functions within the organization.

- ✓ Does your agency have a COOP
  Continuity of Operations Plan that
  identifies key personnel? Are these
  individuals functionally cross-trained
  enough (or familiar with the general
  organization's mission) to handle
  essential functions should an event, such
  as a pandemic flu break out?
- ✓ Will you allow workers to telework from home? Are there any other considerations? How will protective gear get delivered to workers?
- Does your agency have documentation that outlines critical data systems and individuals responsible for their maintenance? Do they have a back up plan should an event; such as a pandemic flu break out occur?
- ✓ Do you already have Delegations of Authority and Orders of Succession in sufficient detail per FPC 65?
- Are there sufficient accessible resources at your organization or elsewhere off site necessary to carry out essential functions?

BREAKOUT ROOM		FACILITATOR:
AGENCY SIZE		SCRIBE:
READINESS LEVEL	Group A / No Plan	COOP SME:

Ī	MESSAGE INJECT 03	POINTS OF DISCUSSION

Three weeks into the outbreak, hospitals and outpatient clinics throughout the state begin to suffer the effects of this virus. It is estimated that nearly one million Minnesotans have contracted the virus with 30% to 40% of physicians, nurses, and other health-care workers in Minnesota, and almost 50% nationwide, are absent due to illness, care of sick family members, fear of contracting illness, or having been deceased more than 10,000 Minnesotans have died. Intensive care units are overwhelmed with patients seeking treatment, who require mechanical ventilators for survival. Offsite care center have been set up throughout the state.

Not only are health care personnel suffering shortages, law enforcement, other emergency personnel, and local utility companies are too. This shortage results in cutbacks in routine services. There are no more vaccinations in the national stockpile. It will take a minimum of 3-6 months for additional vaccine to be generated.

Other area residents (particularly those with chronic medical conditions) are afraid to venture out for fear of contracting the influenza virus. Hundreds of individuals are choosing to stay home, which is causing their essential supplies, such as food and water stores, to become depleted.

### THIS IS AN EXERCISE

Key infrastructure personnel are missing work due to illness or death. The governor has recommended staggering of workforces to decrease the number of persons at work and may consider a "snow day", where all are encouraged to stay home except for personnel who maintain critical functions in the community. Homeland Security Secretary Michael Chertoff has raised the national terror threat level to high due to the nation's compromised situation.

Stay tuned to for continuing coverage of events around the country...

#### THIS IS AN EXERCISE

# **INFORMATION TO BE PROVIDED BY FACILITATOR**

Individuals suffering from influenza continue to die. All stores of vaccine have been exhausted and you have been instructed to try to maintain your capability to fulfill essential missions to the best of your ability. It does not look like there is an end to this strain of flu in sight.

#### **Inject Focus**

Validate COOP plans, policies, and procedures.

Ensure agency personnel are sufficiently trained to carry out agency minimum essential operations and functions when deployed at a COOP site or working in a COOP environment.

Test and validate equipment to ensure both internal and external interoperability.

- Have you considered covering life support issues for the alternate site? (This should include food, medical, housing, transportation and communications for staff.)
- Have you considered devolution of the agency's activities to another region in case the agency is unable to resume delivery of essential services?
- Where are your non-emergency personnel during this?
- Have you made provisions for and/or considered physical security at the site?
- √ Have you considered communications needs at the site? Teleworkers?
- Have you considered an MOU that has sufficient detail per FPC 65 the will enable the exclusive use of a site within 12 hours and for up to 30 days?
- Is there a plan in place in case essential services (heat, electricity, etc.) at various sites begin to fail?
- ✓ Is there a plan in place to dispense medication (if there is any left) to sick workers who cannot get out of the house?
- ✓ Office supplies and deliveries of equipment are interrupted. Office equipment breaks with no repairman to service these units.

BREAKOUT ROOM		FACILITATOR:
AGENCY SIZE		SCRIBE:
READINESS LEVEL	Group A / No Plan	COOP SME:

Two months later, the flu wanes and conditions return to normal for a brief time. The number of ill persons in the nation and specifically in the Minnesota area has been on the decline for about two weeks. Hospital staffs are exhausted; those that are not ill or deceased have worked double and even triple shifts since the pandemic flu virus emerged. All those oncall individuals that might assist in providing health care have either already been pulled in or are no longer available to assist due to sickness or death.

# INFORMATION TO BE PROVIDED BY FACILITATOR

Stores are getting in periodic shipments of food and supplies, which are purchased by the consumer and are quickly exhausted as soon as they are delivered to the store. Because of high demand and low availability, customers periodically riot.

Local law enforcement and emergency crews are still suffering under the strain of an increased workload, extended hours, and lack of personnel. However, since the flu is waning, it gives these emergency and key personnel a moment to order new supplies, attempt to obtain new personnel, and reassess their situation.

The flu returns but is not as deadly as it was when it first emerged. Patients get sick but do not generally die from this second wave of flu.

Requests for patient transport to hospitals and health care facilities are still consistent but due to a decreased and exhausted staff, response time is higher.

Law enforcement, emergency medical personnel, health providers, and local utility companies are still suffering through personnel shortages. At this time, they are so short-staffed that many emergency services cannot be performed without an exceedingly high response time. Waste disposal crews are no longer picking up refuse from their customers and trash is left exposed on the curbside.

# THIS IS AN EXERCISE

#### **Inject Focus**

The primary focus of this period is to discuss a second wave hit.

Ensure agency personnel explore the implications of a second wave of the flu and what it means to the overall performance of essential operations and how to deal with it.

- ✓ How will you inform all personnel, including non-emergency personnel, which the threat of death from the flu has lessened but the necessity exists not to return to normal operations?
- What will you do with the reduction of personnel available to fill key positions?
- Have you considered procedures to report status of your organization to your HQ and other agency points of contact (POCs), if applicable?
- When will you decide when the threat has passed? When is it safe to return to normal operations? How will you do this?
- ✓ What will you do to address the mental health issues that your workers and their families will face after this pandemic?
- How will you address long-term questions on succession planning for employees who have died?

BREAKOUT ROOM		FACILITATOR:
AGENCY SIZE		SCRIBE:
READINESS LEVEL	Group A / No Plan	COOP SME:

MESSAGE INJECT <b>05</b>	POINTS OF DISCUSSION
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# INFORMATION TO BE PROVIDED BY FACILITATOR

Return to normal operations....

## THIS IS AN EXERCISE

# **Inject Focus**

The primary focus of this period is to discuss a return to normal operations.

Ensure agency personnel understand the procedures to phase down COOP operations and transition to normal activities when appropriate.

- ✓ How will you inform all personnel, including non-emergency personnel, that the threat of or actual emergency no longer exists, and provide instructions for resumption of normal operations?
- What will you do to supervise an orderly return to the normal operating facility, or movement to other temporary or permanent facility (ies)? Will you use a phased approach if conditions necessitate?
- Have you considered procedures to report status of your relocation to your HQ and other agency points of contact (POCs), if applicable?
- ✓ Will you conduct an after-action review of COOP operations and effectiveness of plans and procedures as soon as possible, identify areas for correction, and develop a remedial action plan? How will you do this?

BREAKOUT ROOM		FACILITATOR:
AGENCY SIZE		SCRIBE:
READINESS LEVEL	Group B	COOP SME:
	Has an alt site	
This may be a mixed group.	Done some TT&E	

MESSAGE INJECT 01 POINTS OF DISCUSSION

#### THIS IS AN EXERCISE

In the New York, Chicago, and Los Angeles areas there is a rush of people flooding into emergency rooms and urgent care centers. At this point, there are no specifics available, except that this mysterious illness appears to be an aggressive strain of influenza. This outbreak of unusually severe influenza/respiratory illness has occurred affecting individuals in all age groups in the New York, Chicago, and Los Angeles areas. Within the last 24 hours, at least 150, 000 cases were reported in these areas. The 24-hour news channels report that of the 150,000 cases reported, 10,000 patients have been hospitalized. Of these, 2,500 individuals have already died. Many of these victims appear to have severe breathing problems requiring the use of ventilators. It is assumed that some of these individuals contracted the flu when they visited areas located in Asia and Turkey. A spokesman for the U.S. Centers for Disease Control and Prevention (CDC) has no specifics, except that this strain of the flu appears to be very aggressive.

The Minnesota State Department of health has reported no cases of similar flu-like symptoms in other individuals. As it stands, emergency rooms are quiet as there hasn't been a flood of individuals complaining of flu-like symptoms or suffering from respiratory distress.

Stay tuned for continuing coverage of events locally and around the country...

# THIS IS AN EXERCISE

#### INFORMATION TO BE PROVIDED BY FACILITATOR

The CDC investigates the circumstances involving how people contracted this illness, and along with laboratory results, determines that the strain of flu is, in fact, the H5N1, Avian influenza virus. Knowing that this virus spreads through human to human transmission, critical workers, such as health care workers, are the first to be vaccinated with a small supply of experimental vaccine against this threat; however, it is unknown if these individuals will gain immunity to this strain of flu from this vaccine. Several cases of the avian influenza are suspected among ill people in Minneapolis and St. Paul hospitals.

# THIS IS AN EXERCISE

#### **Inject Focus**

The focus of this period will be identifying what the emergency communications, interagency communications, alerts / rosters, and initial planning. In addition, the focus will include emergency preparedness planning concerns.

From FPCs: Ensure that agency personnel are familiar with recognizing the potential threat of a pandemic flu outbreak, which will result in not only informing personnel of this threat but also keeping them abreast of the situation as it develops, and also vaccinating key individuals. This process will require identifying key personnel by using alert, notification, and deployment procedures.

- What is your formal decision process for determining when to COOP? Who makes the decision, and what circumstances could trigger activation?
- ✓ Do you have a COOP Continuity of Operations Plan that outlines how staff will be contacted both during duty hours and after hours?
- ✓ What sort of COOP training have you had so far for your employees?
- How do you ensure contact information is up to date?
- ✓ Do you have at least two methods of contacting staff?
- ✓ Do you have already existing documents that detail directions to on procedures for replacing lost key personnel, training alternates, etc.?
- ✓ What plan is in place to vaccinate key personnel?

BREAKOUT ROOM		FACILITATOR:
AGENCY SIZE		SCRIBE:
READINESS LEVEL	Group B	COOP SME:
	Has an alt site	
This may be a mixed group.	Done some TT&E	

MESSAGE INJECT 02	POINTS OF DISCUSSION
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Seven days have now passed since the initial outbreak and local hospitals and outpatient clinics in the Twin Cities area have seen more than 4,500 cases of potential Avian influenza. People begin to flood emergency rooms and outpatient clinics seeking antiviral medications. Stores begin to flood with people that seek to purchase over-the-counter remedies and medications for the flu. Other individuals flood grocery stores to stock up on food and supplies. As more and more people flood stores, they aggressively spread the virus through germs via touch or airborne particles.

Since persons can be infected and contagious 1-2 days before showing symptoms, there is no way to determine the actual numbers of those infected with the virus at this time.

Stay tuned for continuing coverage of events locally and around the country...

# THIS IS AN EXERCISE

# **INFORMATION TO BE PROVIDED BY FACILITATOR**

So much for the good news...

CDC personnel, in the course of evaluating the virus strain circulating in Minnesota, have identified and confirmed it as the H5N1 strain of influenza. A small number of your key personnel have been vaccinated but there is no way of knowing if the vaccination will provide immunity to these individuals. Statewide cases are reported in Duluth, Rochester, St. Cloud, Brainerd, and Bemidji. The experimental vaccine has run out and antiviral medications are in short supply.

#### THIS IS AN EXERCISE

# **Inject Focus**

The focus of this period will be a discussion of the initial procedures for activating the COOP plan and vital records.

From FPCs: Exercise procedures by activating and deploying designated personnel as alternates in the event the chain of command is disrupted during an event such as a pandemic flu virus. It is essential that agencies have the ability to perform essential functions and operations during an emergency situation.

Ensure that the plan to identify and allocate alternate human resources to perform essential functions of the agency is sufficient, complete and current.

- ✓ Does your agency have a COOP Continuity of Operations Plan that already identifies key individuals and an alternate? What sort of advanced crosstraining of individuals would you consider?
- Do you already have Delegations of Authority and Orders of Succession in sufficient detail per FPC 65?
- ✓ Are there sufficient resources on site or elsewhere (off site) available if needed to carry out essential functions?
- Consider a procedure to outline how direction and control will transfer if key personnel and their alternate are not available to perform necessary functions.
- ✓ Procedures for combining resources with other agencies need to be outlined in detail. The combination of resources must be able to be up and running in 12 hours or less.

BREAKOUT ROOM		FACILITATOR:
AGENCY SIZE		SCRIBE:
READINESS LEVEL	Group B	COOP SME:
	Has an alt site	
This may be a mixed group.	Done some TT&E	

Three weeks into the outbreak, hospitals and outpatient clinics throughout the state begin to suffer the effects of this virus. It is estimated that nearly one million Minnesotans have contracted the virus with 30% to 40% of physicians, nurses, and other health-care workers in Minnesota, and almost 50% nationwide, are absent due to illness, care of sick family members, fear of contracting illness, or having been deceased more than 10,000 Minnesotans have died. Intensive care units are overwhelmed with patients seeking treatment, who require mechanical ventilators for survival. Offsite care center have been set up throughout the state.

Not only are health care personnel suffering shortages, law enforcement, other emergency personnel, and local utility companies are too. This shortage results in cutbacks in routine services. There are no more vaccinations in the national stockpile. It will take a minimum of 3-6 months for additional vaccine to be generated.

Other area residents (particularly those with chronic medical conditions) are afraid to venture out for fear of contracting the influenza virus. Hundreds of individuals are choosing to stay home, which is causing their essential supplies, such as food and water stores, to become depleted.

# THIS IS AN EXERCISE

Key infrastructure personnel are missing work due to illness or death. The governor has recommended staggering of workforces to decrease the number of persons at work and may consider a "snow day", where all are encouraged to stay home except for personnel who maintain critical functions in the community. Homeland Security Secretary Michael Chertoff has raised the national terror threat level to high due to the nation's compromised situation.

Stay tuned to for continuing coverage of events around the country...

# THIS IS AN EXERCISE

# **INFORMATION TO BE PROVIDED BY FACILITATOR**

Individuals suffering from influenza continue to die. All stores of vaccine have been exhausted and you have been instructed to try to maintain your capability to fulfill essential missions to the best of your ability. It does not look like there is an end to this strain of flu in sight.

#### **Inject Focus**

Validate COOP plans, policies, and procedures.

Ensure agency personnel are sufficiently trained to carry out agency minimum essential operations and functions when deployed at a COOP site or working in a COOP environment.

Test and validate equipment to ensure both internal and external interoperability.

- Have you considered covering life support issues for your site? (This should include food, medical, housing, transportation and communications for staff.)
- Have you considered devolution of the agency's activities to another region in case the agency is unable to resume delivery of essential services?
- ✓ Where are your non-immediately essential personnel during this? Can they be trained in other roles to help facilitate the performance of essential functions in an event such as a pandemic flu virus?
- Have you made provisions for and/or considered physical security at the site?
- Have you considered communications needs at the site? Teleworkers?
- ✓ Have you considered an MOU that has sufficient detail per FPC 65 the will enable the exclusive use of a site within 12 hours and for up to 30 days?
- ✓ Office supplies and deliveries of equipment are interrupted. Office equipment breaks with no repairman to service these units.

BREAKOUT ROOM		FACILITATOR:
AGENCY SIZE		SCRIBE:
READINESS LEVEL	Group B	COOP SME:
	Has an alt site	
This may be a mixed group.	Done some TT&E	

MESSAGE INJECT **04** POINTS OF DISCUSSION

#### THIS IS AN EXERCISE

Two months later, the flu wanes and conditions return to normal for a brief time. The number of ill persons in the nation and specifically in the Minnesota area has been on the decline for about two weeks. Hospital staffs are exhausted; those that are not ill or deceased have worked double and even triple shifts since the pandemic flu virus emerged. All those oncall individuals that might assist in providing health care have either already been pulled in or are no longer available to assist due to sickness or death.

# INFORMATION TO BE PROVIDED BY FACILITATOR

Stores are getting in periodic shipments of food and supplies, which are purchased by the consumer and are quickly exhausted as soon as they are delivered to the store. Because of high demand and low availability, customers periodically riot.

Local law enforcement and emergency crews are still suffering under the strain of an increased workload, extended hours, and lack of personnel. However, since the flu is waning, it gives these emergency and key personnel a moment to order new supplies, attempt to obtain new personnel, and reassess their situation.

The flu returns but is not as deadly as it was when it first emerged. Patients get sick but do not generally die from this second wave of flu.

Requests for patient transport to hospitals and health care facilities are still consistent but due to a decreased and exhausted staff, response time is higher.

Law enforcement, emergency medical personnel, health providers, and local utility companies are still suffering through personnel shortages. At this time, they are so short-staffed that many emergency services cannot be performed without an exceedingly high response time. Waste disposal crews are no longer picking up refuse from their customers and trash is left exposed on the curbside.

#### THIS IS AN EXERCISE

#### **Inject Focus**

The primary focus of this period is to discuss a return to normal operations.

Ensure agency personnel understand the procedures to phase down COOP operations and transition to normal activities when appropriate.

- Have you considered procedures to report status of your relocation to your HQ and other agency points of contact (POCs), if applicable?
- What will you do to address the mental health issues that your workers and their families will face after this pandemic?
- How will you address long-term questions on succession planning for employees who have died?

BREAKOUT ROOM		FACILITATOR:
AGENCY SIZE		SCRIBE:
READINESS LEVEL	Group B	COOP SME:
	Has an alt site	
This may be a mixed group.	Done some TT&E	

MESSAGE INJECT <b>05</b>	POINTS OF DISCUSSION

# **Inject Focus** THIS IS AN EXERCISE The primary focus of this period is to discuss a return **INFORMATION TO BE PROVIDED BY** to normal operations. **FACILITATOR** Ensure agency personnel understand the procedures to phase down COOP operations and transition to Return to normal operations.... normal activities when appropriate. **Points of Discussion:** How will you inform all personnel, including non-emergency personnel, that the threat of or actual emergency no longer exists, and provide instructions for resumption of normal operations? What will you do to supervise an orderly return to the normal operations? Will you conduct an after-action review of THIS IS AN EXERCISE **COOP** operations and effectiveness of plans and procedures as soon as possible, identify areas for correction, and develop a remedial action plan? How will you do this?

BREAKOUT ROOM		FACILITATOR:
AGENCY SIZE		SCRIBE:
READINESS LEVEL	Most Advanced	COOP SME:

MESSAGE INJECT 01	POINTS OF DISCUSSION
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In the New York, Chicago, and Los Angeles areas there is a rush of people flooding into emergency rooms and urgent care centers. At this point, there are no specifics available, except that this mysterious illness appears to be an aggressive strain of influenza. This outbreak of unusually severe influenza/respiratory illness has occurred affecting individuals in all age groups in the New York, Chicago, and Los Angeles areas. Within the last 24 hours, at least 150, 000 cases were reported in these areas. The 24-hour news channels report that of the 150,000 cases reported, 10,000 patients have been hospitalized. Of these, 2.500 individuals have already died. Many of these victims appear to have severe breathing problems requiring the use of ventilators. It is assumed that some of these individuals contracted the flu when they visited areas located in Asia and Turkey. A spokesman for the U.S. Centers for Disease Control and Prevention (CDC) has no specifics, except that this strain of the flu appears to be very aggressive.

The Minnesota State Department of health has reported no cases of similar flu-like symptoms in other individuals. As it stands, emergency rooms are quiet as there hasn't been a flood of individuals complaining of flu-like symptoms or suffering from respiratory distress.

Stay tuned for continuing coverage of events locally and around the country...

## THIS IS AN EXERCISE

# **INFORMATION TO BE PROVIDED BY FACILITATOR**

The CDC investigates the circumstances involving how people contracted this illness, and along with laboratory results, determines that the strain of flu is, in fact, the H5N1, Avian influenza virus. Knowing that this virus spreads through human to human transmission, critical workers, such as health care workers, are the first to be vaccinated with a small supply of experimental vaccine against this threat; however, it is unknown if these individuals will gain immunity to this strain of flu from this vaccine. Several cases of the avian influenza are suspected among ill people in Minneapolis and St. Paul hospitals.

## THIS IS AN EXERCISE

## **Inject Focus**

The focus of this period will be identifying what the emergency communications, interagency communications, alerts / rosters, and initial planning. In addition, the focus will include emergency preparedness planning concerns.

From FPCs: Ensure that agency personnel are familiar with recognizing the potential threat of a pandemic flu outbreak, which will result in not only informing personnel of this threat but also keeping them abreast of the situation as it develops, and also vaccinating key individuals. This process will require identifying key personnel by using alert, notification, and deployment procedures.

- ✓ What decision process is in writing for determining when to COOP? Who will make the decision, and what could trigger activation?
- ✓ Are there specific provisions in the plan to prevent a premature COOP?
- How will staff be contacted both during duty hours and after hours?
- What are the provisions in your plan for ensuring contact information is up to date?
- Does your plan have at least two methods of contacting staff?
- ✓ What sort of COOP training have you had so far for your employees?
- ✓ Should you decide to COOP once you have more information, does your plan contain detailed directions to an alternate site, procedures for access, parking, and miscellaneous information for employees such as dress code?

BREAKOUT ROOM		FACILITATOR:
AGENCY SIZE		SCRIBE:
READINESS LEVEL	Most Advanced	COOP SME:

MESSAGE INJECT 02	POINTS OF DISCUSSION

Seven days have now passed since the initial outbreak and local hospitals and outpatient clinics in the Twin Cities area have seen more than 4,500 cases of potential Avian influenza. People begin to flood emergency rooms and outpatient clinics seeking antiviral medications. Stores begin to flood with people that seek to purchase over-the-counter remedies and medications for the flu. Other individuals flood grocery stores to stock up on food and supplies. As more and more people flood stores, they aggressively spread the virus through germs via touch or airborne particles.

Since persons can be infected and contagious 1-2 days before showing symptoms, there is no way to determine the actual numbers of those infected with the virus at this time.

Stay tuned for continuing coverage of events locally and around the country...

### THIS IS AN EXERCISE

## **INFORMATION TO BE PROVIDED BY FACILITATOR**

So much for the good news...

CDC personnel, in the course of evaluating the virus strain circulating in Minnesota, have identified and confirmed it as the H5N1 strain of influenza. A small number of your key personnel have been vaccinated but there is no way of knowing if the vaccination will provide immunity to these individuals. Statewide cases are reported in Duluth, Rochester, St. Cloud, Brainerd, and Bemidji. The experimental vaccine has run out and antiviral medications are in short supply.

#### THIS IS AN EXERCISE

#### **Inject Focus**

The focus of this period will be a discussion of the initial procedures for activating the COOP plan and vital records.

From FPCs: Exercise procedures by deploying designated personnel and equipment to an alternate facility to ensure the ability to perform an agency's essential functions and operations during emergency.

Ensure that backup data and records required to support essential functions at the alternate facility are sufficient, complete and current.

- ✓ What best practices have you implemented to identify vital records necessary to accomplishing essential functions?
- ✓ Does the plan outline critical data systems necessary to access vital records? How is it done?
- ✓ How does the plan cover Delegations of Authority and Orders of Succession? Are they in sufficient detail per FPC 65?
- ✓ Is the alternate site equipped or are there sufficient resources elsewhere off site identified that will be needed to carry out essential functions? Have you specifically outlined telecom, office machines, desk space, supplies, and furniture set up? What about teleworkers?
- ✓ How does the plan outline procedures for site activation? Is there a pre-deployment team identified to set up the site? Is the site able to be up and running in 12 hours or less?

BREAKOUT ROOM		FACILITATOR:
AGENCY SIZE		SCRIBE:
READINESS LEVEL	Most Advanced	COOP SME:

Ī	MESSAGE INJECT 03	POINTS OF DISCUSSION

Three weeks into the outbreak, hospitals and outpatient clinics throughout the state begin to suffer the effects of this virus. It is estimated that nearly one million Minnesotans have contracted the virus with 30% to 40% of physicians, nurses, and other health-care workers in Minnesota, and almost 50% nationwide, are absent due to illness, care of sick family members, fear of contracting illness, or having been deceased more than 10,000 Minnesotans have died. Intensive care units are overwhelmed with patients seeking treatment, who require mechanical ventilators for survival. Offsite care center have been set up throughout the state.

Not only are health care personnel suffering shortages, law enforcement, other emergency personnel, and local utility companies are too. This shortage results in cutbacks in routine services. There are no more vaccinations in the national stockpile. It will take a minimum of 3-6 months for additional vaccine to be generated.

Other area residents (particularly those with chronic medical conditions) are afraid to venture out for fear of contracting the influenza virus. Hundreds of individuals are choosing to stay home, which is causing their essential supplies, such as food and water stores, to become depleted.

### THIS IS AN EXERCISE

Key infrastructure personnel are missing work due to illness or death. The governor has recommended staggering of workforces to decrease the number of persons at work and may consider a "snow day", where all are encouraged to stay home except for personnel who maintain critical functions in the community. Homeland Security Secretary Michael Chertoff has raised the national terror threat level to high due to the nation's compromised situation.

Stay tuned to for continuing coverage of events around the country...

#### THIS IS AN EXERCISE

# INFORMATION TO BE PROVIDED BY FACILITATOR

Individuals suffering from influenza continue to die. All stores of vaccine have been exhausted and you have been instructed to try to maintain your capability to fulfill essential missions to the best of your ability. It does not look like there is an end to this strain of flu in sight.

#### **Inject Focus**

Validate COOP plans, policies, and procedures.

Ensure agency personnel are sufficiently trained to carry out agency minimum essential operations and functions when deployed at a COOP site or working in a COOP environment.

Test and validate equipment to ensure both internal and external interoperability.

- ✓ How does the plan cover staffing issues as well as life support issues for the site? (This should include food, medical, housing, transportation and communications for staff.)
- Are rosters of staff complete and current? What about the "B" team?
- How does your agency detail devolution of activities elsewhere in case it is unable to complete essential functions? How do you know you are operational?
- How has the plan made provisions for and/or considered physical security at the site?
- ✓ How will operational control transfer to the alternate site? Who will be notified?
- ✓ Is there an MOU that has sufficient detail per FPC 65 the will enable the exclusive use of the site within 12 hours and for up to 30 days? Why might you want this even if you are going to agency owned space?
- ✓ Office supplies and deliveries of equipment are interrupted. Office equipment breaks with no repairman to service these units.

BREAKOUT ROOM		FACILITATOR:
AGENCY SIZE		SCRIBE:
READINESS LEVEL	Most Advanced	COOP SME:

MESSAGE INJECT <b>04</b>	POINTS OF DISCUSSION
I MESSAGE INJECT <b>U4</b>	I POINTA OF DIAGOAAION

Two months later, the flu wanes and conditions return to normal for a brief time. The number of ill persons in the nation and specifically in the Minnesota area has been on the decline for about two weeks. Hospital staffs are exhausted; those that are not ill or deceased have worked double and even triple shifts since the pandemic flu virus emerged. All those oncall individuals that might assist in providing health care have either already been pulled in or are no longer available to assist due to sickness or death.

# INFORMATION TO BE PROVIDED BY FACILITATOR

Stores are getting in periodic shipments of food and supplies, which are purchased by the consumer and are quickly exhausted as soon as they are delivered to the store. Because of high demand and low availability, customers periodically riot.

Local law enforcement and emergency crews are still suffering under the strain of an increased workload, extended hours, and lack of personnel. However, since the flu is waning, it gives these emergency and key personnel a moment to order new supplies, attempt to obtain new personnel, and reassess their situation.

The flu returns but is not as deadly as it was when it first emerged. Patients get sick but do not generally die from this second wave of flu.

Requests for patient transport to hospitals and health care facilities are still consistent but due to a decreased and exhausted staff, response time is higher.

Law enforcement, emergency medical personnel, health providers, and local utility companies are still suffering through personnel shortages. At this time, they are so short-staffed that many emergency services cannot be performed without an exceedingly high response time. Waste disposal crews are no longer picking up refuse from their customers and trash is left exposed on the curbside.

# THIS IS AN EXERCISE

## **Inject Focus**

The primary focus of this period is to discuss a return to normal operations.

Ensure agency personnel understand the procedures to phase down COOP operations and transition to normal activities when appropriate.

- ✓ How did you outline a process to supervise an orderly return to the normal operating facility, or movement to other temporary or permanent facility (ies) using a phased approach if conditions necessitate?
- ✓ What written procedure is in place to report the status of a COOP relocation to your HQ and other agency points of contact (POCs), if applicable?
- ✓ How will you inform all personnel, including non-emergency personnel, that the threat of or actual emergency no longer exists, and provide instructions for resumption of normal operations?
- ✓ What will you once it is determined that you can return to the normal operations?
- ✓ Will you conduct an after-action review of COOP operations and effectiveness of plans and procedures as soon as possible, identify areas for correction, and develop a remedial action plan? How will you do this?
- ✓ What will you do to address the mental health issues that your workers and their families will face after this pandemic?
- How will you address long-term questions on succession planning for employees who have died?

BREAKOUT ROOM		FACILITATOR:
AGENCY SIZE		SCRIBE:
READINESS LEVEL	Most Advanced	COOP SME:

MESSAGE INJECT <b>05</b>	POINTS OF DISCUSSION

# INFORMATION TO BE PROVIDED BY FACILITATOR

Return to normal operations....

#### THIS IS AN EXERCISE

## **Inject Focus**

The primary focus of this period is to discuss a return to normal operations.

Ensure agency personnel understand the procedures to phase down COOP operations and transition to normal activities when appropriate.

- ✓ What procedure is in writing to ensure all personnel, including non-emergency personnel, are informed that the threat of or actual emergency no longer exists, and provide instructions for resumption of normal operations?
- ✓ How did you outline a process to supervise an orderly return to the normal operating facility, or movement to other temporary or permanent facility (ies)? Will you use a phased approach if conditions necessitate?
- ✓ What written procedure is in place to report the status of a COOP relocation to your HQ and other agency points of contact (POCs), if applicable?
- ✓ Do you conduct after-action reviews of COOP operations and effectiveness of plans and procedures as soon as possible even for training events? How do you identify areas for correction, and develop remedial action plans? How do you document the gaps are closed?